



Business Executives, Inc.
P.O. Box 14264
North Palm Beach, FL 33408

Membership Application

Date: _____ / _____ / _____ BEI Business Category: _____

Business Name: _____

Business Address: _____

Business Phone: _____ Extension: _____ Fax: _____

Email Address: _____ Website: _____

Applicant Name: _____ Alternate Name: _____

Sponsored By: _____

Birthday (mm/dd): _____ Spouse: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

Type of Organization: Sole Proprietorship Partnership Corporation

Are you a member of any other business referral organization? Yes No

If yes, name of organization: _____

What is your product or service? _____

Other services you provide: _____

Membership applications are printed for approval on the last Thursday of every month. Applicants will be notified five days after presentation. If accepted for membership, it is expected that you will abide by the by-laws of Business Executives, Inc., which include timely payment of dues and attendance requirements. We look forward to having you as a member and hope you will enjoy and profit from our organization.

Printed Name: _____

Signature: _____

Date: _____ / _____ / _____

Please mail your completed application to the address above and enclose a check for \$130, which includes a \$65 initiation fee and \$65 first month dues.